

**State of California
Office of Administrative Law**

In re:
Office of the State Fire Marshal

Regulatory Action:

Title 19, California Code of Regulations

Adopt sections: 560.6
Amend sections: 560, 595.2, 595.4, 595.7,
595.10

Repeal sections:

**NOTICE OF APPROVAL OF REGULATORY
ACTION**

Government Code Section 11349.3

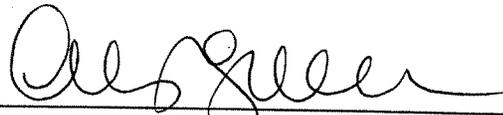
OAL Matter Number: 2021-0811-04

OAL Matter Type: Regular (S)

In this regular rulemaking action, the Office of the State Fire Marshal updates the fee schedule and related forms and requirements for the Portable Fire Extinguisher Concern Licensing and Certification Program.

OAL approves this regulatory action pursuant to section 11349.3 of the Government Code. This regulatory action becomes effective on 1/20/2022.

Date: January 20, 2022



Amy R. Gowan
Attorney

For: Kenneth J. Pogue
Director

Original: Michael J. Richwine, State Fire
Marshal

Copy: Eireann Flannery

REGULAR

See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 10/2019)

OAL FILE NUMBERS	NOTICE FILE NUMBER Z-2021-0517-02	REGULATORY ACTION NUMBER 2021-0811-045	EMERGENCY NUMBER
------------------	---	--	------------------

For use by Office of Administrative Law (OAL) only

OFFICE OF ADMIN. LAW
2021 AUG 11 PM3:45

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

JAN 20 2022

1:10 PM

NOTICE	REGULATIONS
--------	-------------

AGENCY WITH RULEMAKING AUTHORITY STATE FIRE MARSHAL	AGENCY FILE NUMBER (if any)
--	-----------------------------

A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE	TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE <input type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON	TELEPHONE NUMBER	FAX NUMBER (Optional)
OAL USE ONLY <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	NOTICE REGISTER NUMBER	PUBLICATION DATE	

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Portable Fire Extinguisher - Fee Increase	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)
---	--

2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)	
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	ADOPT 560.6
	AMEND 560, 595.2, 595.4, 595.7 and 595.10.
TITLE(S) Title 19, Division 1	REPEAL

3. TYPE OF FILING			
<input checked="" type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))	<input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
<input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4)	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	<input type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))	<input type="checkbox"/> Other (Specify)		

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)			
<input type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a))	<input checked="" type="checkbox"/> Effective on filing with Secretary of State	<input type="checkbox"/> \$100 Changes Without Regulatory Effect	<input type="checkbox"/> Effective other (Specify)

6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY		
<input checked="" type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660)	<input type="checkbox"/> Fair Political Practices Commission	<input type="checkbox"/> State Fire Marshal
<input checked="" type="checkbox"/> Other (Specify) <u>State Fire Advisory Board</u>		

7. CONTACT PERSON Diane Arend	TELEPHONE NUMBER 916-224-0021	FAX NUMBER (Optional)	E-MAIL ADDRESS (Optional)
----------------------------------	----------------------------------	-----------------------	---------------------------

8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

For use by Office of Administrative Law (OAL) only
ENDORSED APPROVED
JAN 20 2022
Office of Administrative Law

SIGNATURE OF AGENCY HEAD OR DESIGNEE <u>Wendy Collins</u>	DATE 8/11/2021
TYPED NAME AND TITLE OF SIGNATORY Wendy Collins Asst State Fire Marshal	per agency request

TEXT OF PROPOSED REGULATIONS (Final)

California Code of Regulations
Title 19. Public Safety
Division 1. State Fire Marshal
Chapter 3. Fire Extinguishers
Article 3. General Provisions

Added text is shown in underline and deleted text is shown in ~~strikethrough~~

Article 3. General Provisions

§ 560. General Provisions and Fee Schedule

(a) No person shall engage in the servicing and maintenance of portable fire extinguishers under the scope of this chapter as defined in ~~(Section 550.3)~~ without having first submitted a signed application, and all documents, and after physical inspection of the company facility, necessary to demonstrate compliance with, ~~and having obtained a license from, the State Fire Marshal in accordance with the provisions of this chapter. Licenses shall be processed in accordance with Title 19, California Code of Regulations, Section 3.33.~~

(b) Applications shall be made in writing on forms available by the State Fire Marshal, or through the electronic application and electronic payment process "GOVMotus Fire", located on the State Fire Marshal website: <https://osfm.fire.ca.gov>. Every fire extinguisher concern license or certificate of registration fee required in accordance with the provisions of Section 13189 of the Health and Safety Code shall be paid in legal tender, or electronic payment or by money order or postal note, or valid personal check made payable to the "State Fire Marshal". Fee shall accompany each application for license or certificate of registration as prescribed in Section 560 (d).

(c) Fees are non-refundable and shall be retained by the State Fire Marshal to offset the costs incurred through the processing and evaluation of all applications.

Every fee shall be paid ~~at or as follows:~~

(1) by mailed to the Sacramento Headquarters Office of the State Fire Marshal at CAL FIRE - Office of the State Fire Marshal, Cashiers Unit - FE Program, P.O. Box 997446, Sacramento, CA 95899-7446, or

(2) submitted through the Office of the State Fire Marshal electronic application process "GOVMotus Fire" or

(3) in person at the Sacramento Headquarters Office of the State Fire Marshal.

(d) The original, upgrade, change of ownership, change of location, re-inspection and annual renewal fee for any license or a certificate of registration issued pursuant to this chapter shall be as follows:

(1) Certificate of Registration pursuant to Section 595.9.....	\$85-\$185
(2) A fire extinguisher Concern license for firms engaged in the business of performing for a fee specific acts of servicing portable fire extinguishers pursuant to Section 595.5, or change of ownership, or annual renewal.....	\$625-\$1,050
(3) A "L" (Limited) fire extinguisher servicing license for public or private entities not engaged in the business, nor performing for a fee, specific acts pursuant to Section 595.5(a)(7) of servicing their own portable fire Extinguishers, or annual renewal.....	\$325-\$600
(e) Application for renewal of a license or for a certificate of registration, which has expired for one year shall be considered as an original application.....	\$325
(f)(4) Application for change of location or license upgrade any license revision requiring a physical inspection by a State Fire Marshal designee of a licensed concern pursuant to Sections 595.5(e) and 595.7.....	\$325-\$600
(g)(5) Certificate of Registration annual renewal including recertification exam test fee (T19-CCR pursuant to Section section 595.10(c).....	\$85-\$185
(h)(6) Inspection fee for second and each subsequent licensing re-inspection.....	\$200-\$300
(i)(7) Replacement Certificate of Registration Card or License pursuant to Section 595.4	\$25-\$92.50
(8) Service fee for a returned or dishonored check pursuant to Government Code, Section 6157(b).....	\$30

Note: Authority cited: Sections 13160 and 13189, Health and Safety Code; and Section 6157(b), Government Code. Reference: Sections 13160, 13164, 13165, 13176, 13177, 13178 and 13189, Health and Safety Code; and Section 6157(b), Government Code.

§ 560.6 Forms.

(a) The following forms, in the format developed by the State Fire Marshal, are hereby incorporated by reference, and available by the State Fire Marshal, or through the electronic application process "GOVmotus Fire", located on the State Fire Marshal website at: <https://osfm.fire.ca.gov>. Forms must be used when applying for a Portable Fire Extinguisher License or Certificate of Registration. Such forms shall be accompanied by the prescribed fees in Section 560(d).

1. Application for Concern License or Change (FE-1 REV.10-2021)

2. Application for Limited Concern License or Change (FE-2 REV.10-2021)
3. Application for Certificate of Registration or Change (FE-3 REV.10-2021)
4. Application for Replacement Certificate of Registration Card (FE-4 REV.10-2021)

NOTE: Authority cited: Section 13160, Health and Safety Code. Reference: Section 13160, Health and Safety Code.

Article 8. Licensing and Certificates of Registration

§ 595.2. Expired Documents.

Application for renewal of any license or Certificate of Registration which has expired for less than one year from date of expiration shall pay the renewal fee, as outlined in Sections 560 (d)(2), (3), and (5), plus a fifty percent (50%) penalty fee. Application for renewal of any class of license or for a Certificate of Registration which has expired for more than one year shall be considered as an original application.

Note: Authority cited: Section 13160, Health and Safety Code. Reference cited: Sections 13160, 13166, 13167, 13179, 13180, 13189, Health and Safety Code.

§ 595.4. Duplicate Replacement Issuance.

A duplicate replacement license or Certificate of Registration card may be issued by the State Fire Marshal. A written statement describing the reasons for the duplicate replacement issuance shall be submitted by the licensee or registrant before duplicate replacement will be issued. The statement shall explain fully the reason for the destruction of the license certificate of registration card. The fee as outlined in Section 560(d)(7) A fee equal to fifty percent (50%) of the original fee shall be submitted for the issuance of a duplicate replacement certificate of registration card.

Note: Authority: Section 13160, Health and Safety Code. Reference: Sections 13160, 13175 and 13183, Health and Safety Code.

§ 595.7. Business location.

For purpose of licensing, post office box numbers, Commercial Mail Receiving Agency (CMRA), mail forwarding establishments, telephone answering service establishments and other such similar establishments are not acceptable as physical business locations. Licensees shall provide the State Fire Marshal with the actual physical business location from which business is conducted. This address shall match the physical address as listed on the Fire Extinguisher Concern License. Each applicant shall furnish a valid local business license from the local community that matches their physical address as listed on the "Fire Extinguisher Concern License". A licensed concern shall notify the State Fire Marshal of a change of location on a Fire Extinguisher Application for Concern License Status or Change application form and submit a fee of \$125.00 as prescribed in Section 560.

Note: Authority: Section 13160, Health and Safety Code. Reference: Sections 13160, 13163, 13164, 13169, 13170, 13172 and 13174, Health and Safety Code.

§ 595.10. Examination Procedures.

(a)-(b) [no changes]

(c) Beginning on January 1, 1994, every four years at time of renewal when deemed necessary by the State Fire Marshal, applicants for renewal of

certificates of registration shall successfully pass a written examination with payment of appropriate fees as outlined in Section 560(d)(5) and as required by Section 13177, Health and Safety Code. These fees are non-refundable in accordance with Section 560(c).

(d) Any applicant failing to take an examination applied for within ~~thirty (30)~~ ninety (90) days of the date of eligibility must re-apply for the intended examination with payment of appropriate fees as outlined in Section 560(d)(1). These fees are non-refundable in accordance with Section 560(c).

(e) [no change]

Note: Authority: Section 13160, Health and Safety Code. Reference: Sections 13160, 13177, 13178 and 13185, Health and Safety Code.



ADOPT

APPLICATION FOR CERTIFICATE OF REGISTRATION OR CHANGE

Personal Information Notice

Pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1977 (Civil Code Sections 1798, et seq.), notice is hereby given for the request of personal information by this form. The requested personal information is voluntary. The principal purpose of the voluntary information is to facilitate the processing of this form. The failure to provide all or part of the requested information may delay processing of this form. No disclosure of personal information will be made unless permissible under Article 6 of the Information Practice Act of 1977 (Civil Code Section 1798.24). Each individual has the right, upon request and proper identification, to inspect all personal information in any record maintained on the individual by an identifying particular. Direct any inquiries to calfire.cpo@fire.ca.gov.

SECTION I Application is hereby made for the following:

- \$185.00 New Application
- \$185.00 Upgrade Application EE: _____

SECTION II General Information:

*All fields below are required and must be completed. We cannot process application without complete information.

Name: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Driver's License Number: _____

Hair: _____ Eyes: _____ Height: _____ Weight _____ DOB: _____

Email: _____

Have you ever held a Certificate of Registration? No Yes EE: _____

If so, was your Certificate of Registration denied, revoked, or suspended? No Yes

If yes, please explain: _____



SECTION III Employer Information:

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Telephone Number: _____ Concern Number: _____

Section IV Certification Statement

I understand that false statements or misrepresentation of any information on this application will be grounds for denial of the document for which I am applying. I certify that all information provided herein is accurate and truthful.

Signature _____ Date _____

IMPORTANT NOTICE: This application will not be accepted without the appropriate non-refundable fee. All items must be completed. An incomplete application could be the basis for denial of a certificate.

SECTION V Submission

Please make checks/money orders payable to "CAL FIRE / OSFM and mail with application to:

**CAL FIRE / Office of the State Fire Marshal
 Cashiers Unit / Fire Extinguisher Program
 P.O. Box 997446
 Sacramento, CA 95899-7446**

For Departmental Use
 Only

_____-0102-4129400-
 4129400011-35405906-
 59421 \$ _____

*Please contact the Assistant Program Coordinator with questions. FE@fire.ca.gov



APPLICATION FOR LIMITED CONCERN LICENSE OR CHANGE

SECTION I General Information

*All fields below are required and must be completed. We cannot process application without complete information. One application is required per location.

Company Name: _____

Physical Address:
 (No PO Boxes) _____

City: _____ State: _____ Zip: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone Number: _____

Email Address: _____

SECTION II Fee Schedule

- \$600.00 New Application (complete all but section VII)
- \$300.00 Re-Inspection (complete Section I thru VII)
- \$0.00 Name Change (complete Section V and VII)

SECTION III Application is hereby made for a Limited Portable Fire Extinguisher Concern License

Title 19 California Code of Regulations, Section 595.5 (a) (7):

A class of license, limited to public or private entities that are not engaged in the business of servicing fire extinguishers and which only maintain their own portable fire extinguishers. A Type L license may only perform maintenance of stored pressure dry powder and dry chemical fire extinguishers, water type and wet chemical type fire extinguishers and external annual maintenance of halogenated agent and carbon dioxide fire extinguishers.

SECTION IV Submission

A completed application (on an **original application** form) and all required supplemental data should be submitted to the address listed below. Applications will be reviewed in the order which they are received at the Office of the State Fire Marshal (OSFM). Failure to supply all needed information (including signature or illegible applications) will result in the delay of processing or rejection of your application.



Please make checks/money orders payable to CAL FIRE/OSFM and mail with application to:

**CAL FIRE / Office of the State Fire Marshal
Cashiers Unit / Fire Extinguisher Program
P.O. Box 997446
Sacramento, CA 95899-7446**

For Departmental Use
Only

_____ -0102-4129400-
4129400011-35405906-
59421 \$ _____

Please contact the Assistant Program Coordinator with questions. FE@fire.ca.gov

SECTION V

I certify that I am familiar with the statutes contained in the California Health and Safety Code and the regulations contained in Title 19, California Code of Regulations, relating to portable fire extinguishers; that all statements made by me on this application are to the best of my knowledge true and correct.

I hereby authorize the Office of the State Fire Marshal and any of his properly authorized employees at any time to enter, examine, inspect any premises, building, room, or establishment used in servicing, charging, or testing portable fire extinguishers to determine compliance with the provisions of state law and the regulations and standards adopted by the Office of the State Fire Marshal.

Authorized Agent Name: _____

Title: _____

Signature: _____ Date: _____

SECTION VI

The following documentation is required with ALL applications. Missing documentation will result in the delay of processing or rejection of your application.

1. The owner/authorized agent must possess a valid Type 1 & 2 Certificate of Registration.

Certificate of Registration EE Number: _____

2. The owner must have at least 24 months of experience with Type 1 & 2. Please provide written documentation of at least 24 months of experience in the servicing, maintenance, recharging, hydrostatic testing, and installation of portable fire extinguishers. This shall be accomplished by having the portable fire extinguisher service employer submit letter(s) on their letterhead attesting to this experience. This correspondence shall indicate their length of employment, an estimate of the number and type of portable fire extinguishers that they have experience with and a statement that the individual has the necessary experience to obtain a license. Additional documentation may include training certificates from the various portable fire extinguisher manufacturers and college classes related to Fire Science.



- The company must have a certificate of liability insurance with a minimum of \$1,000,000.00 in general liability coverage. Please provide proof of insurance (note that the address listed on the coverage must match the physical address listed on this application). Also, please list "Office of the State Fire Marshal" as the Certificate Holder.

The company may have a Hold/Harmless letter in lieu of a certificate of liability insurance. Please provide this letter.

- The company must have a technician with a valid certificate of registration. Please provide a list of technicians (include name, EE number, and Type held).

Name: _____	EE Number: _____	Type: _____
Name: _____	EE Number: _____	Type: _____
Name: _____	EE Number: _____	Type: _____
Name: _____	EE Number: _____	Type: _____
Name: _____	EE Number: _____	Type: _____

SECTION VII

The following section is for Name/Location changes only.

- List new company name/address

New Company Name: _____

New Physical Address: _____

City: _____ State: _____ Zip: _____

- The company must have a certificate of liability insurance with a minimum of \$1,000,000.00 in general liability coverage. Please provide proof of insurance with the new name/address.

The company may have a Hold/Harmless letter in lieu of a certificate of liability insurance. Please provide this letter.



IMPORTANT NOTICE:

- (1) This application will not be accepted without the appropriate non-refundable fee. All items must be completed. An incomplete application could be the basis for denial of a license.**
- (2) WHEN FILED WITH AN APPLICATION, ALL DOCUMENTATION BECOMES THE PROPERTY OF THE OFFICE OF THE STATE FIRE MARSHAL AND WILL BE RETAINED FOR OUR RECORDS.**
- (3) The Office of the State Fire Marshal will verify each piece of documentation that is submitted as proof of experience. Any misinformation or deception will be grounds for denial. If the OSFM cannot verify the appropriate experience and training, your application will be rejected. The preceding required information is related only to the experience qualification requirements and the balance of the license application would still have to be completed in its entirety.**
- (4) Per the California Code of Regulations, Title 19, Chapter 3, Section 560(h) the fee for a second and/or each subsequent re-inspection will be an additional \$300.00 charge, due prior to the inspection being completed.**



APPLICATION FOR REPLACEMENT CERTIFICATE OF REGISTRATION CARD

Personal Information Notice

Pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1977 (Civil Code Sections 1798, et seq.), notice is hereby given for the request of personal information by this form. The requested personal information is voluntary. The principal purpose of the voluntary information is to facilitate the processing of this form. The failure to provide all or part of the requested information may delay processing of this form. No disclosure of personal information will be made unless permissible under Article 6 of the Information Practice Act of 1977 (Civil Code Section 1798.24). Each individual has the right, upon request and proper identification, to inspect all personal information in any record maintained on the individual by an identifying particular. Direct any inquiries to calfire.cpo@fire.ca.gov.

SECTION I Application is hereby made for the following:

*All fields below are required and must be completed. We cannot process application without complete information.

Fee	Program	Certificate of Registration
<input type="checkbox"/> \$92.50	Fire Extinguishers	EE Number: _____

Item Needed: Card Only Sticker Only Both Card & Sticker Company Certificate

SECTION II Certificate of Registration Information:

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Telephone: _____ Drivers License Number: _____
 Email: _____
 Hair: _____ Eyes: _____ Height: _____ Weight _____ DOB: _____

SECTION III Company License Information:

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Telephone Number: _____ License Number: _____



Per Title 19, CCR Section 595.5, A written statement describing the reasons for the duplicate issuance shall be submitted by the registrant before duplicates will be issued. The statement shall explain fully the reason for the destruction of the Certificate of Registration Card.

SECTION IV Certification Statement

I understand that false statements or misrepresentation of any information on this application will be grounds for denial of the document for which I am applying. I certify that all information provided herein is accurate and truthful.

Signature _____ Date _____

SECTION V Submission

Please make checks/money orders payable to CAL FIRE / OSFM and mail with application to:

**CAL FIRE / Office of the State Fire Marshal
 Cashiers Unit / Fire Extinguisher Program
 P.O. Box 997446
 Sacramento, CA 95899-7446**

**For Departmental Use
 Only**

_____-0102-4129400-
 4129400011-35405906-
 59421 \$ _____

Please contact the Assistant Program Coordinator with questions. FE@fire.ca.gov



APPLICATION FOR CONCERN LICENSE OR CHANGE

SECTION I General Information

****All fields below are required and must be completed. We cannot process application without complete information. One application is required per location.**

Company Name: _____

Note: ALL company names must be approved prior to licensing; contact FE@fire.ca.gov for approval

Physical Address:
 (No PO Boxes)

City: _____ State: _____ Zip: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone Number: _____

Email Address: _____

SECTION II Fee Schedule

- \$1050 Original Application (complete all but section VII)
- \$1050 Ownership Change (complete all but Section VII)
- \$600 Location Change (complete Section V and VII)
- \$600 Upgrade (complete Section III, and V)
- \$300 Re-Inspection (complete Section I thru VII)
- \$0.00 Adding Partner (complete Section V)
- \$0.00 Deleting Partner (complete Section V)
- \$0.00 Name Change (complete Section V and VII)

SECTION III Application is hereby made for the following:

Indicate type(s) applying for: A B C D E F (see Section VIII for definition of types)

Applicant to be licensed as: Individual Corporation Partnership



SECTION IV Submission

A completed application (on an **original application** form) and all required supplemental data should be submitted to the address listed below. Applications will be reviewed in the order, which they are received at the Office of the State Fire Marshal (OSFM). Failure to supply all needed information (including signature or illegible applications) will result in rejection of your application. Please make check/money order payable to CAL FIRE/OSFM and mail with application to:

**CAL FIRE / Office of the State Fire Marshal
 Cashiers Unit / Fire Extinguisher Program
 P.O. Box 997446
 Sacramento, CA 95899-7446**

**For Departmental Use
 Only**

_____ -0102-4129400-
 4129400011-35405906-
 59421 \$ _____

Please contact the Assistant Program Coordinator with questions.FE@fire.ca.gov

SECTION V

The following documentation is required with ALL applications. Missing documentation will result in the delay of processing or rejection of your application.

1. The company name must be approved by the Office of the State Fire Marshal's Portable Fire Extinguisher Program before submitting this application.
2. The owner must possess a valid **Type 1 & 2** Certificate of Registration.

Owners Certificate of Registration EE Number: _____

3. **The owner must have at least 24 months of experience with Type 1 & 2.** Please provide written documentation of at least 24 months of experience in the servicing, maintenance, recharging, hydrostatic testing, and installation of portable fire extinguishers. This shall be accomplished by having the fire extinguisher service employer submit letter(s) on their letterhead attesting to this experience. This correspondence shall indicate their length of employment, an estimate of the number and type of portable fire extinguishers that they have experience with and a statement that the individual has the necessary experience to obtain a license. Additional documentation may include training certificates from the various portable fire extinguisher manufacturers and college classes related to Fire Science.
4. The company must have a certificate of liability insurance with a minimum of \$1,000,000.00 in general liability coverage. The company must also provide a copy of their current Worker's Compensation Insurance. Please provide proof of insurance (note that the address listed on the coverage must match the physical address listed on this application). Also, please list "Office of the State Fire Marshal" as the Certificate Holder.
5. Reciprocal Agreement- A licensed company who is qualified and authorized to perform servicing, testing and maintenance above the level of certification of the Certificate of Registration holder.



- If applicable, the company must have a local business license from the city/county of physical location. Please provide a copy of this license (note that the address listed on the license must match the physical address listed on this application). **If not applicable, provide written documentation from the city/county that they do not require a business license.**
- The company must have a Board of Equalization Resale License.** Please provide a copy of this license (note that the address listed on the license must match the physical address listed on this application). **Resale Permit #** _____
- Please provide a list of technicians (include name, EE number, and Type held). Please attach separate sheet for additional space if needed. Please provide a photocopy of each technician's current Certificate of Registration ID card (front and back).

Name: _____	EE Number: _____	Type: _____
Name: _____	EE Number: _____	Type: _____
Name: _____	EE Number: _____	Type: _____
Name: _____	EE Number: _____	Type: _____

SECTION VI

The following section is for Name/Location changes only.

- List new company name/address

New Company Name: _____

Note: ALL company names must be approved prior to licensing; contact FE@fire.ca.gov for approval

New Physical Address: _____

City: _____ State: _____ Zip: _____

- The company must have a certificate of liability insurance with a minimum of \$1,000,000.00 in general liability coverage. The company must also provide a copy of their current Worker's Compensation Insurance. Please provide proof of insurance with the new name/address. *
- If applicable, the company must have a local business license from the city/county of location. Please provide the license with the new name/location. If not applicable, provide written documentation from the city/county that they do not require a business license. *
- The company must have a Board of Equalization Resale Permit. Please provide a copy of this license with the new name/location. *



*All documentation requested for Name or Location Changes MUST have the updated name and address on them at the time submitted. Failure to provide necessary documentation will result in immediate denial of request. A notarized agreement letter signed by each partner must be provided for all Location Change applications or Partnership Change applications.

IMPORTANT NOTICE:

- (1) This application will not be accepted without the appropriate non-refundable fee. All items must be completed. An incomplete application could be the basis for denial of a license.
- (2) WHEN FILED WITH AN APPLICATION, ALL DOCUMENTATION PROVIDED BECOMES THE PROPERTY OF THE OFFICE OF THE STATE FIRE MARSHAL AND WILL BE RETAINED FOR OUR RECORDS.
- (3) The Office of the State Fire Marshal will verify each piece of documentation that is submitted as proof of experience. Any misinformation or deception will be grounds for denial. If the OSFM cannot verify the appropriate experience and training, your application will be rejected. The preceding required information is related only to the experience qualification requirements and the balance of the license application would still have to be completed in its entirety.
- (4) By signing this application, I am acknowledging that I am ready to be inspected. Failure to be ready at the time of scheduling will result in the delay of processing and require re-inspection.
- (5) Per the California Code of Regulations, Title 19, Chapter 3, Section 560(h) the fee for a second and/or each subsequent re-inspection will be an additional \$300.00 charge, due prior to the inspection being completed.

SECTION VII

I certify that I am familiar with the statutes contained in the California Health and Safety Code and the regulations contained in Title 19, California Code of Regulations, relating to portable fire extinguishers; that all statements made by me on this application are to the best of my knowledge true and correct.

I hereby authorize the Office of the State Fire Marshal and any of his properly authorized employees at any time to enter, examine, inspect any premises, building, room, or establishment used in servicing, charging, or testing of portable fire extinguishers to determine compliance with the provisions of state law and the regulations and standards adopted by the Office of the State Fire Marshal.

SOLE OWNER:

Print Name: _____ Signature: _____ Date: _____



PARTNERSHIP Add Delete

Each partner, including a limited partner, must sign. The printed name and signature of the previous individual owner, partners, or corporate officers certifying release of interest, must appear below. Please attach separate sheet for additional space if needed. (Application MUST include a copy of the notarized Partnership Agreement Secretary of State Form GP-1 or Termination of Partnership Agreement Secretary of State Form GP-4)

Print Name: _____ Signature: _____ Date: _____

Print Name: _____ Signature: _____ Date: _____

CORPORATION The person required to sign on behalf of the Corporation, is the Principal Officer of a Company which is a person who has been authorized by the governing body of that company to act on its behalf during any legal or tax matters that may arise. (Application MUST include a copy of the Articles of Incorporation and/or notarized agreement by all partners if Location Change is requested)

President

Print Name: _____ Signature: _____ Date: _____

Vice President

Print Name: _____ Signature: _____ Date: _____

General Manager

Print Name: _____ Signature: _____ Date: _____

Secretary

Print Name: _____ Signature: _____ Date: _____

Treasurer

Print Name: _____ Signature: _____ Date: _____



SECTION VIII Definition of Types

- Type A The classification of license (595.5 (a) (1)) to service, recharge, inspect, and conduct hydrostatic tests on any or all type of portable fire extinguishers. Includes all service and tests permitted for B, C, D, E and F licenses. This includes halogenated agent fire extinguishers six-year tear down, hydrostatic tests of high-pressure fire extinguisher cylinders as well as being a D.O.T. approved cylinder requalification facility for testing D.O.T. low-pressure fire extinguisher specification cylinders. An "A" license must possess all necessary service manuals, tools, parts, and equipment to perform necessary tests and service.
- Type B The classification of license (595.5 (a) (2)) to perform maintenance and recharging of water based fire extinguishers and external maintenance of carbon dioxide fire extinguishers
- Type C The classification of license (595.5 (a) (3)) to conduct hydrostatic tests of low-pressure fire extinguisher cylinders. A portable fire extinguisher concern possessing this class of license shall be a D.O.T. approved cylinder re-qualification facility if D.O.T. specification cylinders are tested.
- Type D The classification of license (595.5 (a) (4)) to perform maintenance and recharging of dry chemical, dry powder, and external maintenance of halogenated agent fire extinguishers.
- Type E The classification of license (595.5 (a) (5)) to conduct hydrostatic tests of high pressure fire extinguisher cylinders and perform internal maintenance and recharging of carbon dioxide fire extinguishers. A portable fire extinguisher concern possessing this class of license shall be a D.O.T. approved cylinder requalification facility.
- Type F The classification of license (595.5 (a) (6)) to perform internal maintenance recharge and recover halogenated agents from portable fire extinguishers. A portable fire extinguisher concern possessing this license shall have a listed Halon 1211 closed recovery system.



SECTION IX

The following are additional documents needed for specific application types

Type	Additional Documentation
A, E	Attach a copy of current D.O.T. Certification Letter along with D.O.T. Retester Identification Number (RIN)
A, F	Attach a copy of the Certificate for the halogenated processor that bears the company name. (i.e., GETZ Certificate, etc.)
A, C, E	Describe method used to hydrostatic test low-pressure non-D.O.T. specification fire extinguisher cylinders.
B, C, D, E, F	<p>Per section 595.5 (d) Every licensed concern that is not authorized to perform specific acts shall have on file with the Office of the State Fire Marshal reciprocal letters of agreement to perform those specific acts from licensed concerns who are authorized. All required reciprocal letters of agreement shall be submitted to the Office of the State Fire Marshal with each original, renewal, and status change application for license. Any changes to reciprocal letters of agreement shall be reported to the Office of the State Fire Marshal within 15 days of the change. Please provide reciprocal agreements for the maintenance your company will not be licensed for. They must include:</p> <ol style="list-style-type: none">1. Maintenance and recharging of water based fire extinguishers and external maintenance of carbon dioxide fire extinguishers.2. Conduct hydrostatic tests of low-pressure fire extinguisher cylinders.3. Maintenance and recharging of dry chemical, dry powder fire extinguishers.4. Hydrostatic tests of high pressure fire extinguisher cylinders and perform internal maintenance and recharging of carbon dioxide fire extinguishers from fire extinguisher concern possessing this class of license shall be a D.O.T. approved cylinder requalification facility.5. Internal-External maintenance recharge and recover halogenated agents from portable fire extinguishers. A fire extinguisher concern possessing this license shall have a listed Halatron closed recovery system.